



CERTIFICATE OF CANDIDATE SELECTION TO FILL A LATE BALLOT VACANCY FOR A LOCAL OFFICE

State Form 47010 (R8 / 10-07) Indiana Election Commission (IC 3-13-2-5; 3-13-2-8)

INSTRUCTIONS: For use by major political parties in filling ballot vacancies for local office in the final thirty (30) days before election day. This certificate must be filed with the circuit court clerk (or the Indiana Election Division when filing a certificate for a candidate for judge of a circuit, superior, probate, county, or small claims court or prosecuting attorney) not more than 3 days (excluding Saturdays and Sundays) after selection of the candidate.

TO THE	COUNTY CIRCUIT COURT CLERK OR	INDIANA ELECTION	N DIVISION:	
	GENERAL INFORMA	TION		
This is to certify th	-			
(1) As the county of	chairman of the <i>(check one)</i> Democratic Party OR the	_ ·		
	County, Indiana, I certify the name of the			
(2) The candidate	named in this certificate is a duly qualified and registered vo	ter of the above-nan	ned county (and the di	strict or division
the candidate seel	ks to represent), as the candidate for the office of		, District	(if any)
to be voted on at t	he general election to be held on November, _	, to fill a v	acancy now existing o	n this Party ticket.
(3) Or, as the pres	iding county chairman at a meeting of county chairmen unde	•	neeting was conducted	d, the County
	lected the candidate named in this certificate to fill the ballot		· ·	
	named in this certificate is legally qualified to be a candidate	-	office.	
	is executed to request that this candidate's name be certifie			at it will appear on
the general election	on ballot. The written consent of this person to the nomin	nation has previous	sly been filed with thi	s office or is
attached (CAN-31	1 form).			
	CANDIDATE NAME AND RESIDEN	CY INFORMATION		
(6) Name of Candi	date (as the candidate wants the name to appear on the ba	llot and as permitted	to appear on the ballo	t under IC 3-5-7):
(7) Candidata'a rad	nidence address is:			
(7) Carididate's res	sidence address is:			
Complete	Residence Address Must Be Inserted	City	, Indiana	ZIP Code
		Oity		211 0000
(8) Candidate's ma	ailing address is (if different from residence address):			
			, Indiana	
Mailing Address (W	rite "SAME" if both addresses are identical or leave blank)	City		ZIP Code
	CERTIFICATION OF PART	TY CHAIR		
I, the Chair of the a	above-named County (or Chair of the caucus of county chair of caucus of cauc	rmen acting to fill a v te of Candidate Sele	vacancy under IC 3-13- ection is true and comp	-2-5(b)), acting to plete.
Signature of Chair	Printed Name of Chair		/_ Date Signed	/_ (MM/DD/YY)
)			
STATE OF				
COUNTY OF)			SEAL)
Subscribed and swo	orn to before me this day of			
	year			
Notary Public or Oth	ner Official Administering Oath		_	
INOTALLY PUBLIC OF OTE	iei Oilioai Autililiistetiilig Oatil			
My Commission exp	oires (applies only to Notary Public):	County of Resid	lence:	